## PART B - FEE(S) TRANSMITTAL

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24737 7590 07/28/2010 PHILIPS INTELLECTUAL PROPERTY & STANDARDS P.O. BOX 3001 BRIARCLIFF MANOR, NY 10510					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
									(Depositor's name)	
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APPLICATION NO.	FILING DATE	FILING DATE		OR	ATTOI		RNEY DOCKET NO.		FIRMATION NO.	
10/526,864 FITLE OF INVENTION DEVICE	03/04/2005 N: CONTROL OF CUI	RRENT SUPPLIED BY	Alan G. Knapp A TRANSISTOR TO	) A :	PIXEL IN AN EI	ECTR	GB 030093 OLUMINESCENT I	)ISPLA	5468 XY	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	$\Box$	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0		\$1810		10/28/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS							
WALTHALL	, ALLISON N	2629	345-077000							
CFR 1.363).  Change of corresp Address form PTO/SI  "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	ned. Use of a Customer	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Koninklijke Philips Electronics N.V. Eindhoven, The Netherlands  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government									_	
lease check the appropr	rate assignee category or	categories (will not be pr	rinted on the patent):	_	Individual (a) Co	rporati	on or other private gro	up entit	y <b>G</b> overnment	
la. The following fee(s)  Issue Fee  Publication Fee (N  Advance Order -		<ul> <li>4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>□ A check is enclosed.</li> <li>□ Payment by credit card. Form PTO-2038 is attached.</li> <li>□ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-12/0 (enclose an extra copy of this form).</li> </ul>								
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